

Missouri Ethics Commission (MEC)
PO Box 1370, Jefferson City MO 65102, (800) 392-8660, www.mec.mo.gov

Office Use:	×
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Statement of Committee Organization

1.	Statement Information	
	Date: 09/28/16	
	Type: New Amended (if amending, enter MEC ID	C161351 & section changed)
2.	Committee Information	
	8th Congressional District Republican Comn	nittee
	3303 PineyKnot Drive, Festus, MO 63028	(573 ₎ 300-1845
	Committee Mailing Address, City, State, & Zip	Wes Wagner
	Official Committee Email Address	County Clerk or Board of Election Commissioners
	Committee Type: Campaign Candidate Continui	ng (PAC) Debt Service Exploratory Political Party
3.	Treasurer/Deputy Treasurer Information	
	David Courtway	
	Treasurer's Name (First & Last) 3303 PineyKnot Drive, Festus, MO 63028	Treasurer's Email Address (optional) (314 \ 606-6360
	Treasurer's Mailing Address, City, State, & Zip	Treasurer's Home Telephone Number Treasurer's Work Telephone Number
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	Deputy Treasurer's Name (if one appointed)	Deputy Treasurer's Email Address (optional)
	Deputy Treasurer's Mailing Address, City, State, & Zip	Dep. Treasurer's Home Telephone Number Dep. Treasurer's Work Telephone Number
	Additional Committee Information	
4.		204 Ferguson, Poplar Bluff, MO, 63901
	Eddy Justice, Chairman Additional Committee Officer's Name & Title (if any)	Additional Committee Officer's Mailing Address, City, State, & Zip
	Connected Organization's Name (if any)	Connected Organization's Mailing Address, City, State, & Zip
	CANDIDATES: Do you have more than one candidate commit	the state of the s
5.	Official Bank Account Information (required by all committee	es)
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ь.	Candidate Supported or Opposed (candidate committees m	ust include self, if candidate)
	Name & Mailing Address, City, State & Zip of Candidate	Telephone Number (Candidate Committees Only)
	Election Date Office Sought & Political Subdivision	Political Party Support or Oppose
7.	Ballot Measure Supported or Opposed (campaign committee	es must complete this section)
	Name of Ballot Measure	Election Date & Political Subdivision Support or Oppose
3.	Signature(s) Check certification(s) & sign (required by all co	ommittees)
	I affirm and attest under penalty of perjury that information	
	rur rier acknowledge that I am aware that any false statement	t or declaration made herein is punishable under Ch. 575 RSMo.
	Committee Treasurer	Candidate (Candidate Committees Only)
	Commerce frequency	Canadate (canadate committees only)

MO 300-1308 Packet (Rev. 11/2014) Form must be completed in full & contain original signature(s), fax filings are not accepted.